

(Print Name of lobbyist)

### STATE OF NEW HAMPSHIRE 2017 Statement of Income and Expenses for LOBBYISTS (RSA Chapter 15)

## **RECEIVED**

JUL 24 2017

111111	PLEASE PRINT			<b>NEW HAMPSHIRE</b>	
I. Name of Lobbyist(s	Griffin Finan			DEPARTMENT OF STATE	
	partnership, firm or c	orporation, if any:			
(Nan	e of partnership, firm or co	rporation)			
125 Summer Street	Suite 510 Boston MA	02110			
Business Address: (Str		(Town/City)	(State)	(Zip Code)	
(301) 980-2133	( )		e-mail gfinan@	draftkings.com_	
(Telephone)		(Fax)			
reportable expense tr	ansactions which are n	ot attributable to any	one client).	ay file a separate report for	
	DraftKings Inc				
OR	(Full Name of Client as it	appears on the Lobbyist	Registration Form)		
		ncluding the lobbyist's	family), or the lobbyin	g firm listed below which are	
IV. Date of Report Reports cover: active	April 26, 2017   ty from date of registration	ı to 3/31/17 acti	July 26, 2017 🔯 wity from 4/1/17 to 6/30/17	7	
	October 25, 2017   activity from 7/1/17 to 9/36	/17 act	January 31, 2018 [] ivity from 10/1/17 to 12/3	1/17	
V. There have been If this box is checked, Concord, NH 03301.	no fees received and complete just this form a	no reportable trans and submit it to the Secr	sactions made since ( etary of State's Office, .	the last report. $\Box$ State House, Room 204,	
VI. Check if addition	al reports are attached	:			
	ed fees or made expendi				
Expense Reimburseme					
☐ If you, your firm,	or your family has made	political contributions,	you must file Addend	um C- Political Contributions	
I have read RSA 15, R and complete to the be (Signature of lobbyist	st of my tripwledge and	RSA 664 and hereby belief.	swear or affirm that the $\frac{7/(9/17)}{(Da}$	foregoing information is true	
Griffin Finan					

# P L E A S E P R I N T

## STATE OF NEW HAMPSHIRE



# Lobbyists Fees and Expenses Addendum A

(RSA Chapter 15:6)

I. Name of Lobbyist(s)	Griffin Finan		
II. Name of lobbyist's par	tnership, firm or corporation, if any:		
(Name of part	nership, firm or corporation)		
III. Name of Client Dra	ftKings Inc	Date	4/19/2017
to lobbying, including fees for	all fees received from the client identified above or services such as public advocacy, government ng legislation, and related legal work. The gr	t relations	, or public relations services
a) Total of all fees received in this reporting period			1,400
	this calendar year, prior to this reporting period tal of all prior monthly reports for this calendar y	b) \$ _ ear)	0.00
c) Total of all fees received (Add lines a and b)	to date	c) \$	1,400
d) Indicate the amount of any such fees that are due, but have not yet been paid			0.00
fees. Separate reports are to the lobbyist(s)/firm that are Expenses are to be reported during the reporting period individual expenses where the lunch where the cost was \$2 being lobbied, purchase of a (c) an itemized statement of any purpose not covered by ceremonial object to be give restaurant expenses for a le contributions will be reported	orships, firms, or corporations are required to report to be filed for expenditures made relative to each unrelated to any one client a separate report in one of three categories of expenses: (a) the for salaries, benefits, support staff, and office enter expenditure was of \$25.00 or less (for example 5.00 or less, purchase of a pen with a value of leach individual expenditure made during this report (a) (for example: purchase of a meal with value on to the subject of lobbying with a value great gislative reception). Expenses for honorariums don separate addendums and should not be report for this reporting period for salaries, benefits,	client and may be fe aggrega xpenses; (ale: meals ess than \$3 ed with a porting perioue of greer than \$2 expense	if expenditures are made by ited for the lobbyist(s)/firm te total of all expenses paid (b) the aggregate total of all purchased during a business 10 that is given to the person value of \$25.00 or less); and ited of greater than \$25.00 for ater than \$25, purchase of 25, but not greater than \$50 ereimbursement, or political dendum A.
support staff, and office expe	a) \$	0.00	
b) Total aggregate of expendin a), of \$25 or less.	b) \$ _	0.00	
c) Total of all itemized expenditures reported in detail in section VI.			0.00

d) Total expenses for this reporting period (Add lines a, b and c)	d) \$
e) Total of expenses paid this calendar year, prior to this reporting period (This should be the amount on line f of addendum A for last month's report)	e) \$ <u>0.00</u>
f) Total of all expenses year to date	f) \$
VI. Other Expenses:  Provide the following detail for all expenditures of more than \$25 made from leperiod, including by whom paid or to whom charged.	obbying fees during this reporting
Paid to:	Amount:
· · · · · · · · · · · · · · · · · ·	\$
	\$
	\$
	\$
	\$
	\$
Sworn Statement/Affirmation by Lobbyist	
I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affirm is true and complete to the best of my knowledge and belief.	m that the foregoing information
25/1/2	7(9/17 (Date)
(Signature of lobbyist)  Griffin Finan	(Date)
(Print Name of lobbyist)	